1367801 FORM D **UNITED STATES** Expires: SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Received SEC FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, Washington, DC UNIE 49 SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL 3235-0076 OMB Number:

April 30, 2008 Estimated average burden 16.00 hours per response:

SEC USE ONLY						
Prefix		Serial	Serial			
	DATE F	RECEIVED				
	DATE	RECEIVED				

Name of Offering (check if this is an amendment and name has changed, and indicate change								
Goldman Sachs Global Relative Value, LLC: Units of Limited Liability Company Inte	rests							
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE							
Type of Filing: ☐ New Filing ☑ Amendment								
A. BASIC IDENTIFICATION DATA	<u> </u>							
Enter the information requested about the issuer								
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)								
Goldman Sachs Global Relative Value, LLC								
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telep 08040825 —							
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton,	(609) 497-5500							
New Jersey 08540								
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)							
(if different from Executive Offices)								
Brief Description of Business	PROCESSED							
To operate as a private investment fund.	HOOLOGED							
• • • • • • • • • • • • • • • • • • •	FEB 2 7 2008							
Type of Business Organization								
[] corporation	THOMSOME (please specify):							
[] business trust ☐ limited partnership, to be formed	FINANCIAL Liability Company							
	THEFT							
Month Year	.							
Actual or Estimated Date of Incorporation or Organization: 1 1 1 0 1	☐ Actual ☐ Estimated							
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre	viation for							
State: CN for Canada; FN for other foreign								
GENERAL INSTRUCTIONS								

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2 Enter the information requested for the following:	
* Each promoter of the issuer, if the issuer has been organized within the past five years;	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of the issuer; 	of a class of equity securities
* Each executive officer and director of corporate issuers and of corporate general and managing partners of pa	artnership issuers; and
* Each general and managing partner of partnership issuers.	. <u></u>
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑	General and/or Managing Partner
Full Name (Last name first, if individual)	
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)	
Eusiness or Residence Address (Number and Street, City, State, Zip Code)	
701 Mount Lucas Road, Princeton, New Jersey 08540	
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual)	
Goldman Sachs Princeton Fund, LLC	
Eusiness or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540	
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual)	
Goldman Sachs Hedge Fund Partners, LLC	
Husiness or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540	
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General and/or Managing Partner
I'ull Name (Last name first, if individual)	
Citco SGHB as Custodian for Goldman Sachs Hedge Fund Partners Plus, LLC	
Itusiness or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540	
Check Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ *of the Issuer's Managing Member	General and/or Managing Partner
Full Name (Last name first, if individual)	
Barbetta, Jennifer	
Business or Residence Address (Number and Street, City, State, Zip Code)	
v/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York 10005	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ *of the Issuer's Managing Member	General and/or Managing Partner
Full Name (Last name first, if individual)	•
Clark, Kent A.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ *of the Issuer's Managing Member	General and/or Managing Partner
Full Name (Last name first, if individual)	
Lawson, Hugh J.	
Business or Residence Address (Number and Street, City, State, Zip Code)	

A. BASIC IDENTIFICATION DATA

c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004

				B. IN	FORMAT	ION ABO	OUT OFF	ERING				
		<u> </u>		-							Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Ø				
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?									\$1,000,000*			
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions in lesser amounts. 3 Does the offering permit joint ownership of a single unit?									Yes ☑	No □		
4 Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Name	e (Last name	e first, if ind	lividual)									
Coldman	, Sachs & C	Co.				_						
Eusiness o	or Residenc	e Address (l	Number and	Street, Cit	y, State, Zip	Code)						
85 Broad	Street, Nev	v York, Ne	w York 100	104								
Mame of A	Associated E	Broker or De	ealer									
_												
	Which Perso All States"							*,;**********			☑ AI	1 States
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[IL]	[lN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii Namo	e (Last name	e iirst, ii ind	ividuai)									
Flucinese	or Residence	o Address ()	Vumber and	Street Cit	v State 7in	Code)				<u>.</u>		
Tiusiness (or residence	e madress (1	variber and	Bircoi, Oil	,, o.u.e, 2.p	(Code)						
Name of A	Associated E	Broker or De	caler									
	Which Perso											
·	All States"			•					FY21 3			1 States
(AL) [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	(ID) [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last name	e first, if ind	ividual)									
										<u> </u>		
Business o	or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer									
	Which Perso All States"						*******					All States
` [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[HN]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity (Shares)	s –	0	\$	0
	☐ Common ☐ Preferred	_		•	
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify: Units of Limited Liability Company Interests)	\$	701,617,952	\$	701,617,9 <u>52</u>
	Total	\$	701,617,952	\$	701,617,952
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		242	\$	701,617,952
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		T. C		D.II. A
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total	_	N/A	\$	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		•	
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		Ø	\$	237,452
	Accounting Fees		፟	\$	20,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)		0	\$	0
	Total		Ø	\$	257,452

	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EX	PENS	ES A	AND USE OF P	ROCE	EDS	****			
	b. Enter the difference between the aggreg- Question 1 and total expenses furnished difference is the "adjusted gross proceeds to	gate offering price given in response to in response to Part C - Question 4.	Part a. Th	C is		\$_		701,360,500			
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted group to Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The total	know of th	n, ie							
					Payments to Officers, Directors, & Affiliates			Payments To Others			
	Salaries and Fees			\$_	0		\$_	0			
	Purchase of real estate			\$_	0		\$_	0			
	Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		\$_	0			
	Construction or leasing of plant buildings a	nd facilities		\$_	0		\$_	0			
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	ge for the assets or securities of		\$	0		\$	0			
	Repayment of indebtedness		Þ	\$	0	- 	\$	0			
	Working capital			\$	0		\$	0			
	Other (specify): Investment Capital			\$	0	- ☑	\$	701,360,500			
	Column Totals			\$_	0		\$_	701,360,500			
Total Payments Listed (column totals added)								701,360,500			
		D. FEDERAL SIGNATU	RE								
fe	The issuer has duly caused this notice to be obllowing signature constitutes an undertaking f its staff, the information furnished by the issue.	by the issuer to furnish to the U.S. S	ecuriti	ies an	d Exchange Comm	nission,	upor				
Issu	uer (Print or Type)	Signature			Date						
Gn	ldman Sachs Global Relative Value, LLC	Kath			February (5, 20	008					
	me of Signer (Print or Type)	Title of Signer (Print of Type)			1 - wer mar 1 3 7 9 %.						
Ka	thryn Pruess	Vice President of the Issuer's Mana	iging l	Mem	ber						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

